PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

VTE-153-B

(Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			(Coldinary)		(Column 2)]		<u> </u>	.OR 7		,	
<u> </u>			20					RATE	FEE	- ·	RATE	FEE.	
FOR			NUMBER FILED		NUMBĖR EXTRA			BASIC FEI	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			20 mi	nus 20=	* <i>J</i>) ·		X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS								X43=		OR	X86=		
MULTIPLE DEPENDENT CLAIM PRESENT							+145=		OR	+290=			
* 11	the difference	ero, enter	"0" in c	olumn 2	ı	TOTAL	700	OR	TOTAL				
CLAIMS AS AMENDED - PART II								101/12	$\bigcirc 0$	ภิกษ	OTHER	THAN	
	(Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	жit		= .		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43=		OR	X86=		
	FIRST PRESE	ENTATION OF MI	JLTIPLE DEF	PENDENT	CLAIM			+145=		OR	+290=		
							L	TOTAL			TOTAL		
	(Column 1) (Column 2) (Column 3)							DDIT. FEE			ADDIT. FEE		
		CLAIMS		HIGHE	ST	(Column 3)	1 г		ADDI-	1 1	•	ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE	
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18≃		
\ME	Independent.	*	Minus	***		=		X43=		OR	X86=		
_	FIRST PRESE	NTATION OF ML	ILTIPLE DEP	ENDENT	CLAIM		╿┟						
							L	+145=		OR	+290=		
							Al	TOTAL DDIT. FEE		OR ,	TOTAL ODIT. FEE		
	······································	(Column 1)		(Colum		(Column 3)	1		• .				
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	Γ	X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43=			X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20." TOTAL ADDIT. FEE TOTAL ADDIT.													